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## UTILITY PATENT APPLICATION

Attorney Docket No.	8308					
First Inventor or Applicat	ion Identifier	Paul John Rennie				
Title		s For Prevention and Treatment of Col a-Like Symptoms and Their Methods of Use				
Express Mail Label No.		EJ302199429US	a			

70	Title		and Influenza-Like Symptoms and Their Methods o Use				
TRANSMITTAL  (Only for new nonprovisional applications under 37 CFR 1.53(b)	Express I	Mail Label No.	EJ302199429US 2				
APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application co	ntents.	ADDRESS TO	Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231				
[x] * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)     [x] Specification Total Pages [] (preferred arrangement set forth below)     - Descriptive Title of the Invention     - Cross References to Related Applications     - Statement Regarding Fed sponsored R&D     - Reference to Microfiche Appendix		6. Nucleot (if applic. a. [] b. [] c. []	ofiche Computer Program (Appendix) dide and/or Amino Acid Sequence Submission able, all necessary) Computer Readable copy Paper Copy (identical to computer copy) Statement verifying identity of above copies				
- Background of the Invention		ACC	OMPANYING APPLICATION PARTS				
- Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. [] Drawing(s) (35 USC 113) Total Sheets [] 4. Oath or Declaration Total pages [2] - a. [x] Newly executed (original or copy) UNSIGNE - b. [] Copy from a prior application (37 CFR 1.63(d)) - (for continuation/divisional with Box 16 compter  i. [] DELETION OF INVENTORS - Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§1.63(d)(2) a 1.33(b).  NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS	eted) and	8. [] 37 C (w)  9. [] Eng 10. [] Info St 11. [] Pre 12. [x] Re (5 13. [] *Sn S 14. [] Cen (iii	ignment Papers (cover sheet & document(s))  ERR 3.73(b) Statement [] Power of Attorney then there is an assignee)  Iglish Translation Document (if applicable)  Formation Disclosure [] Copies of IDS atement (IDS)/PTO-1449 Citations  Idiminary Amendment eturn Receipt Postcard (MPEP 503)  Should be specifically itemized)  Inall Entity [] Statement filed in prior application tatement(s) Status still proper and desired etified Copy of Priority Document(s)  If foreign priority is claimed)				
REQUIRED (37. C.F.R. §1.27), EXCEPT IF ONE FILED IN A PA APPLICATION IS RELIED UPON (37 C.F.R.§1.28).		1					
16. If a CONTINUING APPLICATION, check appropria	ate box and	i supply the requ	uisite information below and in the preliminary				

	muation (j Divisional (j			11011 140. <u>7</u>				
Prior a	application information: Exami	iner: Group/A	Art Unit:					
	ATION or DIVISIONAL only: The en			v of the oath or declara	tion is supplied under Box			
	red a part of the disclosure of the ac							
incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								
		17. CORRESPONDE			- W			
[ ] Custor	ner Number or Bar Code Label			or [ ] Corresponde	ence address below			
		(Insert Customer No. or	Attach bar code labe	ei				
		here)						
	1-1-1							
*****	John M. Howell							
NAME								
					the state of the s			
	The Procter & Gamble Company, H	ealth Care Research Center						
ADDRESS								
	8700 Mason-Montgomery Road							
CITY		STATE	1	ZIP CODE				
	Mason		Ohio		45040			
COUNTRY	Luca	TELEPHONE	510.000.0101	FAX	E12 632 2300			
<u> </u>	USA		513-622-2184		513-622-3300			
		1 1						
Name (Print/Type)   John M. Howell // Registration No. (Attorney/Agent)   33,713								

Signature

Date

October 19, 2000

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## **FEE TRANSMITTAL** for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$) 1304.00

Complete if Known				
Application Number				
Filing Date	October , 2000			
First Named Inventor	Paul John Rennie			
Examiner Name	***************************************			
Group/Art Unit				
Attomey Docket No	8308	<del></del>		

METHOD OF PAYMENT (check one)			FEE	CALC	JLATION (continued)	
1. [X] The Commissioner is hereby authorized to charge indicated	3. At	DITION	AL FE			
fees and credit any over payments to:	Large	Entity	Small			
Deposit Account Number 16-2480	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Deposit Account Name The Procter & Gamble Company	105	130	205	65	Surcharge - late filing fee or oath	()
[X] Charge Any Additional Fee [ ] Applicant claims small entity status. See 37 CFR §127	127	50	227	25	Surcharge - late provisional filing fee or cover sheet	ű
37 C.F.R. §§1.16 and 1.17	139	130	139	130	Non-English specification	0
2. [] Payment Enclosed:	147	2,520	147	2,520	For filing a request for ex parte reexamination	Ū
Check [] Credit Card [] Money Order [] Other	112	920*	112	920*	Requesting publication of SIR prior to Examiner's action	0
FEE CALCULATION	113	1,840*	113	1,840*	Requesting publication of SIR after Examiner's action	0
1 BASIC FILING FEE	115	110	215	55	Extension for reply within 1st month	0
Large Entity Small Entity	116	390	216	195	Extension for reply within 2 <sup>rd</sup> month	1)
Fee Fee Fee Fee Fee Description Fee Paid	117	890	217	445	Extension for reply within 3rd month	Ü
Code (\$) Code (\$)	118	1,390	218	695	Extension for reply within 4* month	1
10.1 710 201 355 Utility filing fee [x]	128	1,890	228	945	Extension for reply within 5° month	[]
106 320 206 160 Design filing fee []	119	310	219	155	Notice of Appeal	Ω
107 490 207 245 Plant filing fee []	120	310	220	155	Filing a brief in support of an appeal	[]
108 710 208 355 Reissue filing fee []	121	270	221	135	Request for oral hearing	Ö
114 150 214 75 Provisional filing fee [] SUBTOTAL (1) (\$)[710]	138	1,510	138	1,510	Petition to institute a public use proceeding	•••
	140	110	240	55	Petition to revive - unavoidable	f)
2. EXTRA CLAIM FEES	141	1,240	241	620	Petition to revive - unintentional	0
Fee From Extra Claims Below Fee Paid	142	1,240	242	620	Utility issue fee (or reissue)	0
	143	440	243	220	Design issue fee	0
Total Claims [53] - 20** = [33] x [18] = [594]	144	600	244	300	Plant issue fee	Ö
Independent Claims [2] - 3** = [0] x [80] = [0]	122	130	122	130	Petitions to the Commissioner	0
Multiple Dependent [0] = [0]	123	50	123	50	Petitions related to provisional applications	
** or number previously paid, if greater; For Reissues, see below	126	240	126	240	Submission of IDS	0
Large Entity Small Entity	581	40	581	40	Recording each patent assignment per property (times number of properties)	, 0
Fee Fee Fee Fee Description Code (\$) Code (\$)	146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
103 18 203 9 Claims in excess of 20	149	710	249	355	For each additional invention to be	Ð
102 80 202 40 Independent claims in excess of 3					examined (37 CFR §1.129(b)	••
104 270 204 135 Multiple dependent claim, if not	179	710	279	355	Request for Continued Examination (RCE)	0
paid	169	710	249	355	Request for expedited examination	Õ
109 80 209 40 **Reissue independent claims	l				of a design application	
over original patent	Other	fee (spe	cify) _			O
110 18 210 9 **Reissue claims in excess of 20	l	_				
and over original patent	Other	fee (spe	city) _		**************************************	0
SUBTOTAL (2) (\$)[594]	· Red	duced by	Basic	Filing Fe	e Paid SUBTOTAL(3) (\$)	0

SUBMITTED BY				Complete	(if applicable)
Name (Print/Type)	John M. Howell	Registration No. (Attorney/Agent)	33,713	Telephone	(513) 622-2184
Signature	O.S. m	Francisco de la companya dela companya dela companya dela companya dela companya de la companya dela companya dela companya de la companya dela co		Date	October 19, 2000

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